

MISSOURI GAMING COMMISSION BINGO DIVISION 3417 KNIPP DR., JEFFERSON CITY, MO 65109 TELEPHONE: (573) 526-5370 FAX: (573) 526-5374 MISSOURI BINGO LICENSE APPLICATION -

**MULTIPLE ORGANIZATIONS** 

FORM **120** (REV12-96)

PLEASE	TYPE O	R PRINT L	EGIBLY	
POSTMARK	LEFF	CTIVE DATE:	EXPIRATION	NDATE
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**BINGO DIVISION** 

3417 KNIPP DRIVE

JEFFERSON CITY, MO 65109

DATE

	<ul> <li>PLEASE PRINT OR TYPE ALL RESPONSES</li> <li>ATTACH A SEPARATE FORM 100 FOR EACH PARTY</li> </ul>	• ANSWER ALL ( ARTICIPATING ORG		• DO NOT WRITE I ETHER WITH REQUI	N SHADED ARE. RED DOCUMEN	AS rs	
	INCOMPLETE APPLICATIONS WILL BE RETURNED. AL	LOW 4-6 WEEKS TO P	ROCESS. TYPE OF	R PRINT USING BLACK	INK.		
[	TYPE OF APPLICATION (CHECK THE APPLICABLE BOX)  REGULAR ANNUAL LICENSE - \$50.00 FEE  SPECIAL BINGO AND PULL-TAB LICENSE - \$25.00 FEE  NAME AND LOCATION OF PRINCIPAL ORGANIZATION		1a. IF YOUR ORGANIZATION PREVIOUSLY HELD A BINGO LICENSE OF ANY TYPE PROVIDE THE LICENSE NUMBER PREVIOUSLY ISSUED				
LOC	DATION (MAILING ADDRESS)				TELEPHONE (ARE.	A CODE AND NUMBER)	
CIT	Υ	STATE	ZIP CODE	COUNTY	( )		
3. I	LIST OF NAMES AND ADDRESSES OF EACH PARTICIPATING QUA	LIFIED ORGANIZATION					
NAME		ADDRESS					
1					-		
2							
3			<u>.</u>			·	
<b>4</b> 5			<del></del>			·····	
	Street address or location description where bingo  Day of week bingo is to be conducted: Day  Describe the purpose for which bingo proceeds will	is to be conducted	plication on behalf zations.  Street Zip Code atements in the form the sponsoring organism allow inspections to any records or do to secure copies and any other finance.	of the organizations.  Dayler oregoing application a anization, have not be anization acknowledged thereunder. For the Comments in connection of financial records to cial records established.	This individual militime Telephone —  are true and corresen convicted of a nowledges that are alide to complare in accordance in with its bingo gas of include, but not set in connection.	AM PM  List also be required  Lect; that the officers, felony; and they are ny license granted by thereto will subject its e with the above and ame, to include those limited to, signature	
SIG	NATURE OF PRESIDING OFFICER OF PRINCIPAL ORGANIZATION	DAYTIME TELEPHONE	SIGNATURE OF S	SECRETARY	!	DAYTIME TELEPHONE	
W	ARNING						
	Each question must be answered fully, accurately an of your application and/or license. When informatio questions. Any statement that is not true or not disclicense.	in is unknown, so inc	dicate. You must	make a reasonable in	rauisy to determin	e the answers to all	
	OR COMMISSION USE ONLY			MAIL APPLICAT	ION AND SUPPOR	TING DOCUMENTS TO	
APF	PLICATION IS COMMENTS  APPROVED	LICENSE NO: CH	ECK NO LICENSE \$	* * * * * · ·	GAMING COMM	IISSION	

DISAPPROVED

SIGNATURE

## MISSOURI BINGO LICENSE APPLICATION INSTRUCTIONS - MULTIPLE ORGANIZATION LICENSE

- Line 1. Place an "X" in the box beside the type of application for which your organization is applying.
- Line 1a. If your organization previously held a bingo license of any type, provide the license number previously issued in the space provided.
- NOTE: Regular Annual License This license should be requested if your organization intends to conduct a bingo game on a regular basis (up to one per week) during the year. Attach \$50.00 license fec.

Special Bingo and Pull-Tab License - This license should be requested if your organization intends to hold a bingo game, at which pull-tabs may be sold during an event such as a fair, picnic, festival or celebration, not exceeding one week and which is held not more than once annually. Attach \$25.00 license fee.

- Line 2. Enter name, address and telephone number of principal organization. For mailing purposes indicate P. O. Box if applicable.
- Line 3. Enter name and address of each participating organization (not to exceed five).
- Line 4. Place and "X" in correct box. Also, indicate by separate attachment if premise is owned by any of the listed organizations under Section 3.
- Time 5. Place and "X" in correct box. Also, indicate by separate attachment if equipment is owned by any of the listed organizations under Section 3.
- Line 6. Enter physical location where Bingo is to be played. Do not use P. O. Box or Rural Route.
- Line 7. Enter the day and time Bingo is to be conducted. If Special License is requested enter date(s).
- Line 8. Describe the purpose(s) for which Bingo proceeds will be used.
- Line 9. Enter the name, address and **daytime** telephone number of the individual who will be responsible for the completion of this **application** on behalf of the organization.

The Bingo License Application must be signed by the Presiding Officer and Secretary of the principal organization.

The following must be furnished with the Bingo Multiple License Application. Attach a separate Form 100 with all required attachments as outlined in the Form 100 Instructions.

- 1. Check or money order in the amount of \$50.00 for Annual License or \$25.00 for Special License made payable to the Missouri Gaming Commission.
- 2. Proof of bingo checking account, bank name and account number. (Not required by holder of a Special License, unless the organization obtains more than three (3) bingo licenses annually or if previously submitted to the Commission.)
- 3. Lease Agreement(s) if organization is leasing premises and/or equipment. These documents are also required if owner is one of organizations listed on Line 3.
- 4. All governing instruments of your organization, including, but not limited to, the following: Certificate of Corporate Good Standing and Articles of Incorporation, Constitution and By-Laws, Articles of Agreement. (NOTE: Not required if previously submitted to the Commission.)

MAIL COMPLETED APPLICATION FORM AND REQUIRED ATTACHMENTS TO:

MISSOURI GAMING COMMISSION BINGO DIVISION 3417 KNIPP DRIVE JEFFERSON CITY, MO 65109